

## Application for Certification as an Eligible Energy Resource Under the Delaware Renewable Energy Portfolio Standard

1.	Name of Facility
	Breman former
2.	Facility Address <u>Sa Hanest Grove Trail</u> <u>Daver, DE 19901</u> L
	Is the facility located within the PJM control area?
3.	Name of Owner  Steve. Brennan  Mailing Address  59 Harvest Grove Trail  Dover, DE 19961
	Phone 215-665-7158 Fax
4.	Name of Operator  Stene Brennan  Mailing Address  59 Harrest Grove Trail  Daver, DE 19901
	Phone 215 - 605 - 7158 Fax
	Email Shicla / Rozanan Sgaramail (00)

<sup>&</sup>lt;sup>1</sup> Documentation will be required to substantiate import capabilities into PJM

5.	60 Liberty Services
	Mailing Address  Mailing Address
	Mailing Address  5700 Kirkwood Highway Suite 106  Wilmington, DE 19708
	Phone <u>45-665-7158</u> Fax
	Email Shirley Bremaria gmail. com
6.	Name of REC/SREC Owner  Shirley / Steve Brennan  Mailing Address  Sq Harrest Crore Trail  Pover, DE 19901
	Phone 215-665-7158 Fax
	Email Shirley Brennan 59@gnail.com
7.	List all PJM-EIS GATS State Certification Numbers assigned to this facility:
8.	Operational Characteristics:
	Fuel Types Used (check all that apply):
	☐ Gas combustion from the anaerobic digestion of organic material
	☐ Geothermal
	☐ Ocean, wave or tidal actions, currents, or thermal differences
	☐ Qualified Biomass <sup>i</sup>
	☐ Qualified Fuel Cells <sup>ii</sup>
	☐ Qualified Hydroelectric <sup>iii</sup>
	☐ Qualified Methane Gas captured from a landfill gas recovery systemiv

	Solar				
	☐ Wind				
	If co-firing, provide the formula on file with PJM Environmental Information				
	Services, Inc. (PJM-EIS)				
	Rated Capacity (in megawatts - DC) 60 660				
	If multiple fuel types are utilized, attach the formula for computing the portion of output per fuel type by megawatts per hour generated.				
	Facility Final Approved Interconnection Date 1.5-14				
	If co-firing with fossil fuels, co-fire start date				
	If co-firing with fossil fuels, attach the allocation formula on file with PJM.				
9.	Is the Applicant's facility customer-sited generation ?  ✓ Yes □ No				
	Is the Applicant's facility a community owned generating facility <sup>vi</sup> ? 口 Yes				
	Can the output from the customer-sited generation be appropriately metered?  Yes   No				

10. If the Applicant's installation is solar or wind sited in Delaware, is a minimum of 50% of the cost of the renewable energy equipment, inclusive of mounting components, manufactured in Delaware?						
□ Yes* No						
Company Name of Installer  Signature of Company Representative						
Address Print Name of Company Representative Wilmington, DE 19808  Address						
<ul> <li>*If Yes, please attach the following documentation:</li> <li>A copy of the supplier's invoice showing Delaware manufactured equipment with this facility identified         <ul> <li>If the supplier's invoice shows only a coded Purchase Order (PO) number, a copy of the company's matching PO that includes the address where the materials were used/installed, must also be supplied</li> <li>If using a master invoice, a record of the draws against the purchased quantity, on the master invoice, must show the address of each use and the quantity of material used</li> </ul> </li> </ul>						
11. If the Applicant's installation is solar or wind sited in Delaware:						
<ul> <li>a. Was the facility physically constructed or installed with a workforce that consists of at least 75% Delaware residents?</li> <li>Yes*</li> <li>No</li> </ul>						
b. Does the installing company employ, in total, a minimum of 75% workers who are Delaware residents?						
Go Liberty Services May Johnson  Company Name of Installer  Signature of Company Representative						
5700 Kirkwood Highway Suiter Kay Rodrigues  Address Print Name of Company Representative  Wilmington, DE 19705  Address						

<sup>\*</sup>If Yes, please attach supporting documentation (see pages 7-8 for details). Please note, in order to qualify for the Labor/Workforce Bonus, at least one of the options (a. or b.) must be met.

I, My Moduse (print name) hereby certify under penalty of perjury that

- 1. I have made reasonable inquiry, and the information contained in this Application is true and correct to the best of my knowledge, information and belief.
- 2. I am authorized to submit and execute this Application and to bind myself and/or my company to the representations contained herein.
- 3. I/my company agree(s) to comply with and be subject to the jurisdiction of the Public Service Commission of the State of Delaware for any matters arising out of my submission of this Application or the granting of the Application.
- 4. In the event that any of the information contained in this Application changes pending the consideration of this Application or after the Application is granted, I/my company will amend the Application to provide the Commission with such changed information.
- 5. I acknowledge that if any of the representations made in this Application or in any amendment thereto are found to be untrue when made, I/the company may be subject to sanctions, including but not limited to monetary fines and/or the revocation of any Certificate granted as a result of the representations made in this Application.

Signature: May	Radings	
Date: 11-3-15		

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Yes* No	Maylin Rodingue					
Company Name of Installer	Signature of Company Representative					
5700 Kirkwood Ayry Suite 104	Print Name of Company Representative					
Address						
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☐ Yes*    No						
Go Liberty Services Company Name of Installer	Muy Rodreyn Signature of Company Representative					
5700 Kirkwood Hay Suite 106	Kaylin Radiquez					
Address Um, DE 19808	Print Name of Company Representative					
Address						

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Signature: Augur	Radrigu	
Date: 11-30-15		